

CLAIMS ONLY						Application Number 10768787	Filing Date		
						Applicant(s)			
* May be used for additional claims or amendments									
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep
1	I					51			
2		I				52			
3		I				53			
4		I				54			
5		I				55			
6		I				56			
7		I				57			
8		I				58			
9		I				59			
10		I				60			
11		I				61			
12		I				62			
13		I				63			
14		I				64			
15		I				65			
16		I				66			
17		I				67			
18		I				68			
19		I				69			
20	I					70			
21	I					71			
22	I					72			
23	I					73			
24	I					74			
25	I					75			
26	I					76			
27	I					77			
28	I					78			
29	I					79			
30	I					80			
31	I					81			
32	I					82			
33	I					83			
34	I					84			
35	I					85			
36	I					86			
37	I					87			
38	I					88			
39	I					89			
40	I					90			
41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
Total Indep	4					Total Indep			
Total Depend	36					Total Depend			
Total Claims	40					Total Claims			